

10/507132

Attorney's Docket No.: 1254-0258 PUS1

DECLARATION, POWER OF ATTORNEY AND PETITION

I (We), the undersigned inventor(s), hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I (We) believe that I am (we are) the original, first, and joint (sole) inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled

GENE CODING FOR SCYTALONE DEHYDRATASE EXHIBITING RESISTANCE TO
AGRICULTURAL FUNGICIDAL AGENT

the specification of which

☐ is attached hereto.

☐ was filed on _____ as

Application Serial No. _____

and amended on _____.

☒ was filed as PCT international application

Number PCT/JP03/01980

on February 24, 2003,

and was amended under PCT Article 19

on _____ (if applicable).

I (We) hereby state that I (We) have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; that I (We) do not know and do not believe that this invention was ever known or used before my invention or discovery thereof, or patented or described in any printed publication in any country before my invention or discovery thereof, or more than one year prior to this application, or in public use or on sale in the United States for more than one year prior to this application; that this invention or discovery has not been patented or made the subject of an inventor's certificate in any country foreign to the United States on an application filed by me or my legal representatives or assigns more than twelve months before this application.

I (We) acknowledge the duty to disclose information known to be material to the patentability of this application as defined in Section 1.56 of Title 37 Code of Federal Regulations.

Application No.	Country	Filing date	Priority claimed	
<u>2002-66955</u>	<u>Japan</u>	<u>March 12, 2002</u>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

_____	_____
(Application Number)	(Filing Date)
_____	_____
(Application Number)	(Filing Date)

Application Serial No.	Filing Date	Status (pending, patented, abandoned)

And I (We) hereby appoint: BIRCH, STEWART, KOLASCH & BIRCH, LLP, CUSOMER
NUMBER 2292

I(We) hereby request that all correspondence regarding this application be sent to the firm of BIRCH, STEWART, KOLASCH &
BIRCH, LLP whose Post office address is: 8110 Gatehouse Road, Suite 100 East, Falls Church, Virginia 22042-1248 U.S.A.

I (We) declare further that all statements made herein of my (our) knowledge are true and that all
statements were made with the knowledge that willful false statements and the like so made are punishable
by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such
willful false statements may jeopardize the validity of the application or any patent issued thereon.

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